

CONTROL NO.

## REPORTS INVENTORY

PREPARE IN DUPLICATE

1. TITLE OF REPORT (If a fill-in report include Form No.)

Encumbrances

2. TYPE  
OF  
REPORT
☒ STATISTICAL  
☐ NARRATIVE  
☐ MACHINE-NAME LISTING

3. FUNCTIONAL AREA

PERSONNEL

LOGISTICS

MEDICAL

TRAINING

SECURITY

☒ FINANCE

ADMIN. GENERAL

OTHER (specify)

4. NO. OF COPIES PREPARED

3

5. FREQUENCY (weekly, monthly, quarterly, etc.)

Monthly

6. DISTRIBUTION (No. of components not number of copies)

2

7. FORMAT (memorandum, form computer print-out, etc)

Statistical

8. ADP PROCESSING

☐ YES

IF YES GIVE ADP PROCESSING NO.

☐ NO

9. DIRECTIVE AUTHORITY REQUIRING REPORT

STAT

10. PREPARING COMPONENT (include lowest level contributing information to report)

FMSAC/B&amp;F

11. FEEDER REPORTS (State total Form No., or nomenclature. Attach separate sheet if necessary.)

## 12. COST FACTORS

## A. MANUAL PREPARATION AND REVIEW COSTS

GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR

## B. COSTS OF COMPUTER PRODUCED REPORTS


TOTAL COSTS PER YEAR

\$ 200.00

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

Provides a summary of dollars set aside to purchase supplies and equipment.

## 14. FUTURE GOALS

GOAL PROPOSED BY COMPONENT FOR THIS REPORT

ESTIMATED SAVINGS

☒ RETAIN AS IS ☐ OTHER (explain)  
☐ CHANGE  
☐ DISCONTINUE

MAN-HOURS

DOLLARS

-0-

-0-

16. DATE OF INVENTORY

20 Oct 1970

17. NAME AND TITLE OF PERSON FURNISHING INFORMATION

FMSAC/B&amp;F

18. EXTENSION